



**ESCORT/ESCORT SERVICE RUNNER  
LICENSE APPLICATION**  
COMPLETE IN DUPLICATE  
FEE: \$25.00 per year

ENCLOSE TWO RECENT PHOTOGRAPHS (1½ X 2) OF APPLICANT

CITY LICENSE  
(316) 268-4553

\_\_\_\_ ESCORT  
\_\_\_\_ ESCORT SERVICE RUNNER

\_\_\_\_ NEW  
\_\_\_\_ RENEWAL

**PERSONAL INFORMATION:**

Name	
Alias/maiden name	
Residential address	
City, State, Zip	
Mailing Address	
City, State, Zip	
Date of birth	
City & state of birth	
Home phone	

Within three years prior to the date of submitting this application, have you been adjudged guilty, placed on diversion or been released from probation of a crime involving moral turpitude? \_\_\_\_\_ Yes \_\_\_\_\_ No

I, \_\_\_\_\_, the above named applicant, do solemnly swear that I have read the contents of this application and that all information and answers herein contained are complete and true. In addition, I have read and understand all rules and regulation as set out in Chapter 3.07 of the City Code of Wichita. Furthermore, I hereby agree to comply with all of the laws of the State of Kansas, and all rules and regulations prescribed by the City of Wichita and I consent to the immediate revocation of my license, by the proper officials, for any violation of such laws, rules or regulations.

\_\_\_\_\_  
Signature of Applicant

ID # \_\_\_\_\_

\_\_\_\_\_  
Notary Public

My appointment expires on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**FOR OFFICIAL USE ONLY**

	Approved	Disapproved	Date
Police Department			
License#		Release Date	